COUNTY OF LOS ANGELES

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July 14, 2010

TO:

Each Supervisor

FROM:

Marvin J. Southard, D.S.W

Director of Mental Health

SUBJECT:

MENTAL HEALTH SERVICES ACT SKID ROW SERVICES

QUARTERLY REPORT – JULY 2010

This memo provides the latest status report regarding continuing Mental Health Services Act (MHSA) funded programs in the Skid Row area in response to your Board's April 3, 2007 motion instructing the Department of Mental Health (DMH) to take several actions related to efforts to reduce homelessness in Skid Row in coordination with communities outside of Skid Row.

Your Board instructed DMH to provide a quarterly progress report on the MHSA community-based services and supports planned for Skid Row including:

- Progress on implementation of programs planned for Skid Row, including Service Area Navigator Teams, Crisis Resolution Services, Full Service Partnerships, Wellness Centers, and the development of housing options;
- Tracking outcome measures for MHSA funded programs in the Skid Row area;
 and
- Tracking the number of clients who refuse medical treatment for alcohol and drug abuse.

We will continue to provide quarterly reports, as instructed.

MJS:TB:LAH:oc

Attachment

Sachi A. Hami, Executive Officer

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH MENTAL HEALTH SERVICES ACT SKID ROW SERVICES PROGRESS REPORT

July 14, 2010

On April 3, 2007, the Board of Supervisors approved the Department of Mental Health's (DMH) request to utilize Mental Health Services Act (MHSA) funding to implement programs to reduce homelessness and promote wellness and recovery in the Skid Row area. Since that time, the Department has implemented the following programs:

- Crisis Resolution Service (CRS) at the Downtown Mental Health Center (DMHC)
 which provides short term, intensive mental health and supportive services,
 including comprehensive assessment, medication evaluation and management,
 emergency shelter placement, and the initiation of benefits establishment.
- Skid Row Management Team (SRMT) provides overall administration, management and coordination of existing services and the development of new services in collaboration with local stakeholder planning groups.
- Client Run Wellness Center (CRWC) for the Skid Row area to serve individuals
 who no longer require intensive mental health services. On September 9, 2008
 the Board of Supervisors approved the Board letter awarding Emotional Health
 Association dba SHARE! the contract with DMH to operate that CRWC in the
 Skid Row area. The program has been operational since April 2009.
- A directly operated Wellness Center had been planned for the Skid Row area since shortly after the passage of the MHSA. On March 1, 2009, the Department accomplished this goal with the transformation of the DMHC outpatient services to an enhanced Wellness Center.
- On June 30, 2009, the newly created DMHC Field Capable Clinical Services (FCCS) team began providing on-site mental health services, integrated with primary healthcare and substance abuse assessment services for clients at the Center for Community Health of Downtown Los Angeles (CCHDLA-formerly known as Leavey Center). The team also has the capacity to conduct field services to those clients residing in the area's shelters and Single Room Occupancy (SRO) Hotels.

DMH MHSA funded programs in the Skid Row area serve individuals in need of a variety of mental health and other treatment needs and supports. With the opening of the CCHDLA, CRWC, the implementation of a DMHC FCCS team, and the transformation of our DMHC outpatient program to a professionally staffed, enhanced Wellness Center, mental health clients in the Skid Row area currently have a vastly enhanced array of wellness and recovery programming to address their individual

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service needs. Other MHSA funded programs that service the Skid Row area include the DMHC Full Service Partnership (FSP) program, and the Service Area 4 Navigator Team (SANT 4) which are discussed below. Also included are detailed reports on the performance of the DMHC CRS program and the Department's funding of new housing development, and associated service collaboration efforts.

Full Service Partnership (FSP)

DMHC FSP program was implemented in December 2006 and serves a maximum of 180 consumers. As of July 1, 2010 for which the outcome measures below are compiled, the number of enrollees was at 165 clients. Staff continue efforts to identify and enroll clients that require, and have proven to benefit from the intensity of services provided through FSP programming, which includes 8 recent case referrals. This effort is concurrent with the FSP program evaluating clients that have demonstrated the ability to engage and comply with treatment to programs with lesser levels of programming while still supporting continuing wellness and recovery gains. Alternate programming may consist of directly operated Wellness Center services; CRWC services; along with employment, and ongoing support from a private mental health provider; and/or other services determined by the individualized needs of those clients. The outcomes described below illustrate the continuing successful efforts of DMHC FSP to reduce homelessness, incarceration, and acute psychiatric hospitalization.

- Days hospitalized year prior to partnership vs. post-partnership (adjusted for time): 45% decrease (last time there was also a 29% decrease).
- Days homeless year prior to partnership vs. post partnership (adjusted for time): 78% decrease (last time 78% decrease).
- Days incarcerated year prior to partnership vs. post partnership (adjusted for time): 2% decrease (last time 2% increase).
- 54% of the 165 clients currently enrolled in FSP have been identified with a
 history of co-occurring mental health and substance abuse/use issue in various
 stages of recovery, from active or episodic use, to abstinence. Most are actively
 engaged in appropriate treatment, ranging from 12 Step meetings, and FSP Skid
 Row Co-Occurring Recovery and Empowerment (SCORE) treatment
 programming.

Service Area 4 Navigation Team (SANT)

SANT 4 covers a wide and diverse area, which includes the Skid Row area. SANT links individuals of all ages to specialized mental health services such as FSP, Assertive Community Treatment (ACT), and Adult Targeted Case Management Services (ATCMS). One of the methods utilized by SANT 4 to accomplish its goals is through the Impact Unit. The Impact Unit serves a critical role in ensuring linkage to community programs and services. Meetings are held semi-monthly to assist Service Area 4's DMH contracted and directly operated programs the opportunity to review individual case referrals, and to determine the most appropriate specialized programs (FSP, ACT, and ATCMS) to serve individual consumers.

The goals of SANT 4 are:

- Linkage to housing resources;
- Successful community reintegration for persons with mental illness from institutional settings;
- Provision of services for underserved, un-served and inappropriately served consumers with mental illness through linkage to appropriate type and level of care;
- Reduction in homelessness in the Skid Row area;
- Promotion of MHSA services in the community in collaboration with service providers and community agencies; and
- Successful outreach and engagement efforts by contracted and directly operated programs that identify and link prospective consumers to services.

During the last quarter, SANT 4 has:

Received 88 referrals for adult consumers ages 26-59 for specialized programs (FSP & FCCS, ATCMS). Of the referrals:

59 referrals were received from non Skid Row areas

- 24 consumers were successfully enrolled in FSP
- 17 currently on outreach and engagement
- 18 refused specialized services or did not meet FSP criteria (referred to FCCS or ATCMS)

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29 Consumers were referred from the Skid Row area

- 5 consumers were successfully enrolled in FSP
- 20 currently on outreach and engagement
- 4 refused specialized services or did not meet FSP criteria (referred to FCCS or ATCMS)

Received 69 referrals for Transition Aged Youth (TAY- aged 16-25 years):

- 1 referred from Skid Row area & pre-authorized
- 26 currently pre-authorized
- 19 Enrolled
- 8 currently on outreach and engagement
- 6 refused services
- 9 refused specialized services or did not meet FSP criteria (referred to FCCS or ATCMS)

Permanent Supportive Housing

Consistent with the goal to reduce homelessness and promote wellness and recovery in the Skid Row area, the Department has committed MHSA funding to provide and/or leverage capital development, operating subsidy and service funding for the development of new supportive housing units. Overall, the Department is supporting the development of 293 new units of permanent supportive housing in Skid Row. Through its FSP and Wellness Center (WC), DMHC has agreed to collaborate with SRO Housing Corporation to provide mental health services to the tenants occupying 31 units designated for special need populations in the James Wood Apartments (See Figure 1). With this commitment to provide mental health services for the 31 units designated as special needs, SRO Housing Corporation was able to leverage \$14.2 million for capital development. This housing project targeting individuals with a history of chronic homelessness and mental illness opened for occupancy in July 2009. Currently, 31 individuals that meet this criterion have moved into these units. DMHC is providing on-site mental health services to those individuals willing to participate.

Through the MHSA Housing Program, a component of the MHSA Community Services and Supports Plan, the Department has made a local commitment to provide capital development and capitalize operating subsidies for the development of new supportive housing units. To this end, 29 projects previously recommended for further planning and development by the MHSA Housing Advisory Board has remained active as of June 25, 2010. Of these 29 projects, three are located in the Skid Row area creating a total of 133 new supportive housing units (See Figure 1).

Figure 1

| Project Name | Number of Units | |
|-------------------------------------|-------------------|----------------|
| DMHC Supported | FSP & WC Units | Total Units |
| The James Wood Apartments | 31 | 53 |
| Total FSP Supported Units | 31 | 53 |
| MHSA Housing Program | | |
| Charles Cobb Apartments | 25 | 76 |
| The Ford Apartments | 90 | 151 |
| New Genesis Apartments | 18 | 106 |
| Total MHSA Housing Program Units | 133 | 333 |

Additionally, SRO Housing Corporation was awarded \$5.2 million through the Governor's Homeless Initiative to develop the Winston Apartments, a 40-unit permanent supportive housing project (See Figure 2). The \$5.2 million provides funding for capital development and a capitalized operating reserve. As a condition of funding, the Governor's Homeless Initiative required that local county mental health departments commit MHSA funds for the provision of mental health services or FSP level services for the residents of the funded units. DMH, through DMHC's FSP and WC Programs, has committed to provide mental health services to qualifying residents of the Winston Apartments. The projected construction start date is August 1, 2010. It is anticipated that the units will be available for leasing in August 2011.

Figure 2

| rigure | | |
|---|-----------------|----------------|
| Project Name | Number of Units | |
| Governor's Homeless Initiative (GHI) | GHI Units Units | |
| The Winston Apartments | 40 | 40 |
| Total GHI Units | 40 | 40 |
| Housing Trust Fund (HFT) | HTF Units | Total Units |
| Project Home | 22 | 71 |
| Rainbow & Abbey Apartments | 50 | 120 |
| Total HTF Units | 72 | 191 |

Finally, a Countywide MHSA Housing Trust Fund Program of \$10.5 million was established to support the development of new permanent supportive housing for people with psychiatric disabilities. The Housing Trust Fund provides funds for on-site

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supportive services for supportive housing projects as well as supportive services for scattered site housing projects.

On May 19, 2009, the Board of Supervisors approved the request to enter into agreements with 12 agencies to provide supportive services for individuals with psychiatric disabilities who reside in new permanent supportive housing projects. As indicated in Figure 2, two of the Housing Trust Fund Program projects are located in Skid Row. While Project Home is still in development and scheduled to open in December 2010, the Rainbow and Abbey Apartments are fully occupied.

Housing Assistance

The Department provides financial resources for clients moving into housing from homelessness by paying the security deposit and purchasing the basic essentials to furnish their apartment. During the period July 1, 2009 through June 25, 2010, the Department assisted the following numbers of DMHC clients with securing permanent housing:

- 44 clients and/or their families with the security deposit at the time of move-in;
- 59 clients and/or their families with purchasing household goods;
- 4 client with eviction prevention; and
- 1 client with ongoing rental assistance.

Crisis Resolution Services (CRS)

CRS is a short term (60 days or less), outpatient based, intensive, clinical and case management program that provides crisis intervention and stabilization for new and returning, disengaged clients. Services include but are not limited to: emergency shelter, transitional and permanent housing, referral for medical and dental services, benefits establishment, intensive case management, psychiatric services and medication, short-term psychotherapy, and crisis intervention.

We are able to report the following information for the period January 2010 through March 2010: thirty days after receiving services from Downtown CRS:

- 99.8% of the clients did not require intervention from the DMH Psychiatric Emergency Services;
- 97.0% of the clients were not admitted to an Inpatient Psychiatric Hospital;
- 99.1% of the clients were not incarcerated; and

 Within ninety days after initial services from Downtown CRS, 21.5% of the clients were linked to and seen by another outpatient mental health service provider.

Since implementation, CRS has:

- Opened 4,123 (through March 2010) unique episodes;
- Provided linkage to emergency, transitional or permanent housing to 38% of homeless clients on day of screening or intake; and
- Engaged 42% of all clients with a co-occurring mental health and substance use/abuse issue(s). As a result, these clients were successfully enrolled in professional treatment, or peer counseling services. Motivational engagement efforts with the remaining 58% are ongoing.

The program provides immediate, frequent, intensive case management for clients, and employs a "whatever-it-takes" approach to addressing individual needs, including mental health services, housing, physical health care, and assistance with benefits establishment. Due to its demonstrated success over the past two years, DMH has decided to develop additional CRS programs in each Service Area throughout the County.

In June 2010, the DMHC CRS team was recognized with an award from the National Association of Counties as an innovative and effective program.

Skid Row Management Team (SRMT)

During this past quarter the DMH Skid Row Management team continued its ongoing efforts to sustain engagement with community providers and stakeholder groups, including consumers and loft dwellers, to obtain critical input about the many issues affecting the Skid Row area. The SRMT has held monthly meetings of the Skid Row Community Advisory Board (SRCAB) as a vital venue for this community engagement effort. The SRCAB is comprised of Skid Row stakeholders, i.e., housing, health, and social service providers, and residents, including consumers that are dedicated to collaborative and integrative efforts to develop more accessible, and effective social and health care services.

SRMT activities over the past quarter have included:

 Represented DMH in the CCHDLA Leadership, Management, and Clinical Team meetings. Other participant agencies are JWCH; ADPA contractor, Homeless Healthcare of Los Angeles; and County agencies: Departments of Public Health; Health Services; and Mental Health.

- Hosted and participated in weekly and monthly meetings of the Skid Row (Family) Assessment Team (SRAT) with Department of Children and Family Services (DCFS), Department of Public Social Services (DPSS), Department of Public Health (DPH), and Los Angeles Homeless Services Authority (LAHSA) regarding the ongoing provision of collaborative services to homeless families with minors.
- Hosted monthly meetings with DMH SRCAB, which is a local forum for consumers, families, service providers and community representatives to provide the SRMT with information, advice and recommendations regarding the mental health service needs in the Skid Row community.
- Participated in the DMH Budget Mitigation work groups aimed at reconciling the Department's Fiscal Year 2009-2010 budget shortfall, and the projected shortfall for Fiscal Year 2010-2011.
- Participated in the monthly DMH Service Area 4 Executive Providers Meetings in collaboration with SA 4 Management Team.
- Participated in the monthly Service Area Advisory Committee (SAAC) meetings for Service Area IV. SAAC meetings are comprised of community stakeholders, including residents, persons who work in the area, consumers, family members of consumers and social service agencies. The meetings serve to educate the public about the MHSA, including priorities such as Prevention & Early Intervention (PEI), and solicit input and feedback from the public about DMH's implementation of MHSA programs.
- Worked with the lead District Chief for SA 4 to finalize a staffing allocation for PEI program implementation in the Skid Row area. The PEI program proposal for the Skid Row area will target individuals exposed to trauma.
- Participated in the Los Angeles City/County Coordinating Council for Homeless Families' monthly working group meetings, to implement recommendations of the Los Angeles 10 Year Plan to End Homelessness that are specific to family homelessness, by ending and preventing family homelessness via increased inter-agency collaboration and service delivery, and increasing access to housing. The work group is exploring ways to address the increase in family homelessness due to the current mortgage and foreclosure crisis.

- Participated in Service Area 4 Birth to 5 Collaborative Meetings, to examine and address the service needs of children in this age range in the Metropolitan Los Angeles area, which includes Skid Row.
- Participated in monthly meetings of the Mental Health Transformation Committee with AFSCME and SEIU.
- Provided technical assistance to other DMH directly operated programs in other areas of Service Area 4 to implement or expand services under MHSA, such as Crisis Resolution Services.

SRMT continues to work collaboratively with area stakeholders, service providers, and residents to enhance mental health services, and related programming and supports for homeless persons in the Skid Row area.

Summary

In summary, the Department of Mental Health has continued to demonstrate its commitment and progress to enhance and increase innovative community based mental health services, housing, effective stakeholder collaborations, and other related services in the Skid Row area through the development of newly funded MHSA programs, and the transformation of existing services. Most recently this has included the implementation of Field Capable Clinical Services at the Center for Community Health of Downtown Los Angeles, a private and public partnership offering fully integrated medical and behavioral health services; the opening of the SHARE! Client Run Wellness Center; collaboration with SRO Housing Corporation's James M. Wood Apartments in Skid Row providing on-site mental health services to residents; and with the creation of the a directly operated Wellness Center at the main DMHC site at 529 South Maple Avenue, DMHC became the first directly operated program which is completely transformed to Mental Health Services Act funded programs. All of these programs are dedicated to reducing homelessness for individuals with mental illness and breaking the costly cycle of emergency, and inpatient care, and incarceration, while promoting recovery and successful community reintegration.